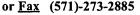
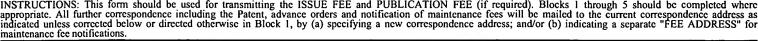
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450





NSTRUCTIONS: This appropriate. All further ndicated unless correctonaintenance fee notifica	ed below or directed oth	or transmitting the ISSU ig the Patent, advance on the in Block 1, by (a)	JE FEE and PUBLICA rders and notification on specifying a new core.	TION FEE (if requ f maintenance fees v respondence address	ired). B vill be n ; and/or	locks I through 5 s nailed to the current (b) indicating a sepa	hould be c correspond arate "FEE	ompleted where lence address as ADDRESS" for
CURRENT CORRESPOND	F	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
20277	7590 01/08	/2007	, E			•		
MCDERMOT	1	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United						
MCDERMOTT WILL & EMERY LLP 600 13TH STREET, N.W. WASHINGTON, DC 20005-3096 MAR 12 2007 I hereby certify that this Fee(s) Transmittal is being deposited with the States Postal Service with sufficient postage for first class mail in an addressed to the Mail Stop ISSUE FEE address above, or being transmitted to the USPTO (571) 273-2885, on the date indicated below								
WASHINGTON	I, DC 20005-3096	L LUUI yu tr	ansmitted to the USP	TO (571) 273-2885, on the d	ate indicate	d below.	
		<i></i>	(Depositor's name)					
CUSTOMER NO.	: 20277	ALL STATE OF THE S	(Signature			(Signature)		
		_						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	ENTOR ATTORNEY DOCKET NO.		CONFIRE	MATION NO.	
10/528,654 03/22/2005			Masahito Tada		070795-0013 7124			
TITLE OF INVENTION: POLYVINYLIDENE FLUORIDE COPOLYMER AND SOLUTION THEREOF								
S .								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	D.	ATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	0-	4/09/2007
EXAMINER ART UNIT			CLASS-SUBCLASS	03/13/2007 HMARZI2 000000		KZI2 00000045 5	00417 1	10528654
WU, IVES J 1724		1724	526-250000	01 FC:1501 1400.00 DA 02 FC:1504 300.00 DA				
	ence address or indicatio	2. For printing on the	the patent from the first that 6.00 DA					
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up or agents OR, alterna	the names of up to 3 registered patent attorneys 1 McDERMOTT WILL & EMERY LLP				
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a 2					
			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
		A TO BE PRINTED ON	<u> </u>	•				
B. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignce data will appear on the patent. If an assignee is identified below, the document has been filed for								
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
KUREHA CHEMICAL INDUSTRY COMPANY, LIMITED TOKYO JAPAN								
		, <u></u> -	101	io om in				
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual 😡 Co	orporatio	on or other private gro	oup entity	Government
a. The following fec(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								
Issue Fee		A check is enclosed.						
	lo small entity discount p	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
Advance Order -	# of Copies	· · · · · · · · · · · · · · · · · · ·	overpayment, to De	posit Account Numb	er Soc	cquired fee(s), any de	n extra cop	y of this form).
	tus (from status indicate	•						
<u>• • • </u>	s SMALL ENTITY state		b. Applicant is no le					
NOTE: The Issue Fee an nterest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other that Office.	the applicant; a reg	istered a	ttorney or agent; or th	ie assignee	or other party in
Authorized Signature	Bak. d	int		_{Date} Mar	ch 12	2, 2007	·	
Typed or printed nam	c <u>Brian K.</u>	Seidleck		Registration N	No	51,321		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.